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*M*

## \*\* CONTINUING DATA \*\*\*\*\*

*none M*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none M*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 04/15/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 5	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i>				
Verified and Acknowledged <i>Natalie M. M.</i> Examiner's Signature Initials				

## ADDRESS

46320

## TITLE

Dynamic composition of help information for an aggregation of applications

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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